

*Parking Authority of River City, Inc.*

**P A R C**

**AUTHORIZATION AGREEMENT FOR PRE-ARRANGED PAYMENTS (ACH DEBITS)**

COMPANY \_\_\_\_\_  
NAME \_\_\_\_\_ P.A.R.C. \_\_\_\_\_ ID NUMBER \_\_\_\_\_ 61-6001862 \_\_\_\_\_

I (we) hereby authorize P.A.R.C Hereinafter called COMPANY, to initiate debit entries to my (our) Checking account indicated below and the depository named below, hereinafter called DEPOSITORY, to debit the same to such account.

DEPOSITORY  
NAME \_\_\_\_\_ BRANCH \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

TRANSIT/ABA NO. \_\_\_\_\_ ACCOUNT NO. \_\_\_\_\_

This authority is to remain in full force and effect until COMPANY and DEPOSITORY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it. I (or either of us) has the right to stop payment of a debit entry by notification to DEPOSITORY at such time as to afford DEPOSITORY a reasonable opportunity to act on it prior to charging account. **After account has been charged, I have the right to have the amount of an erroneous debit immediately credited to my account by DEPOSITORY, provided I (we) send written notice of such debit entry in error to DEPOSITORY within 15 days following issuance of the account statement or 45 days after posting, whichever occurs first.**

NAME(S) \_\_\_\_\_  
(Please Print)

DATE \_\_\_\_\_ SIGNED X \_\_\_\_\_

NAME \_\_\_\_\_  
Last First MI

ADDRESS \_\_\_\_\_  
Street  
City State Zip

PHONE (work) \_\_\_\_\_ PHONE (home) \_\_\_\_\_

GARAGE USED \_\_\_\_\_

MONTHLY RATE \$ \_\_\_\_\_ BEGINNING THE MONTH OF \_\_\_\_\_

**\* To insure accurate recording of account numbers we are requesting that you attach a voided check to this form.**

**ACH debits can be cancelled by giving 15 days notice in writing prior to cancellation.  
Inquires should be directed to:**

*Parking Authority of River City Inc. (P.A.R.C.)  
211 West Muhammad Ali Blvd.  
Louisville, KY 40202  
Phone#(502) 574-3817 Fax#(502)574-4029*